

THE CALIFORNIA STATE UNIVERSITY
GRIEVANCE FORM
UNIT 3

Name: _____

Date of Submission to Campus: _____

Classification: _____

Name of CFA Contact or other

Department or

Representative: _____

Equivalent Unit: _____

Address of CFA Contact or other

Representative:

Campus: _____

Email address: _____

Election: Pursuant to Article 10.6 of the CFA/CSU Agreement, the grievant(s) elect(s) that the procedure under which this grievance shall be processed will be:

A: the Contractual Procedure ☐

If no election made, the grievance shall automatically be processed under the contractual procedure.

B: the Statutory Procedure (Faculty Hearing Committee) ☐

Unless accompanied by Authorized CFA Signature, CFA has not agreed to representation.

Authorized CFA Signature: _____; CFA agrees to representation.

Claimed Violation(s)

Term or terms of agreement alleged violated, misapplied or misinterpreted (provision number or numbers) for Contractual Procedure. Or any rights alleged violated in connection with his/her job classification, benefits, working conditions, appointment, reappointment, tenure, promotion, reassignment, or the like, including but not limited to rights arising under the agreement for Statutory Procedure.

Brief description of the grounds of the grievance including names, dates, places, times, etc., necessary for complete understanding):

Proposed remedy:

Grievant Signature: _____ Date: _____

IMPORTANT NOTE: The collective bargaining agreement requires that all grievances be filed by:

1. Personal Delivery,
2. Certified Mail, with Return Receipt, or
3. Electronically (email or fax) with scanned, signed copy.

CSU responses shall be provided to: (a) grievant(s); (b) CSU Campus Relations and Dispute Resolution, Office of the Chancellor, 401 Golden Shore, 4th Floor, Long Beach, California 90802-4210; and (c) CFA, 1110 K Street, Sacramento, CA 95814.

LEVEL OF FILING

Level I - (Statutory and Contractual Grievances) Date: _____

25-day Informal Resolution Request ☐

Level II - (C.O. - Contractual Grievances only) Date: _____

Response: